FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1 (See instructions)		Office use only	
NAME OF COMMITTEE (in full	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
Windstream Poli	tical Action Committee		
ADDRESS (number and stree	4001 Rodney Parham	Road	
(Check if address			
is changed)	Little Rock		AR 72212 - 1
		CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAIL A	ADDRESS (Please provide only one e-r	,	
(Check if address is changed)	cathy.jarrett@windst	ream.com	
COMMITTEE'S WEB PA	GE ADDRESS (URL)		
(Check if address			
is changed)			
2. DATE 0 2	18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICATION	ON NUMBER	C C00425975	
4. IS THIS STATEMEN	NT NEW (N) OR	X AMENDED (A)	
I certify that I have examined	d this Statement and to the best of my know	vledge and belief it is true, correct a	nd complete
	ROBERT G CLAN	ICV ID	
Type or Print Name of Tre	easurerROBERT G CLAN	ICT JR	
Signature of Treasurer	Electronically Filed by ROBERT C	CLANCY JR	Date 0 2 / D B / Y Y Y Y Y Y
NOTE: Submission of false,	·	subject the person signing this Sta	tement to the penalties of 2 U.S.C. §437g. WITHIN 10 DAYS
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530	